

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Sequence Submission::	Paper
Computer Readable Form (CRF)?::	Yes
Number of Copies of CRF::	1
Title::	IMMUNODIAGNOSTIC DETERMINATION OF USHER SYNDROME TYPE IIA
Attorney Docket Number::	249.0002 0101
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	9
Small Entity?::	Yes
Petition Included?::	No
Licensed US Govt. Agency::	US Dept of Heath and Human Services
Contract or Grant Numbers::	Grant No. RTC P60 DC00982
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Dominic
Middle Name::	E.
Family Name::	COSGROVE
Name Suffix::	Ph.D.
City of Residence::	Omaha

State or Province of Residence:: NE
Country of Residence:: US
Street of Mailing Address:: 5612 Howard Street
City of Mailing Address:: Omaha
State or Province of Mailing Address:: NE
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 68106

Correspondence Information

Correspondence Customer Number:: 26813
Phone Number:: 612/305-1217
Fax Number:: 612/305-1228
E-Mail Address:: amueting@mrgs.com

Representative Information

Representative Customer Number::	26813	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/237,834	10/03/00

Assignee Information

Assignee Name:: BOYSTOWN NATIONAL RESEARCH HOSPITAL
Street of Mailing Address:: 555 North 30th Street
City of Mailing Address:: Omaha
State or Province of Mailing Address:: NE
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 68131

FOOTNOTES